

USE IN LIEU OF PTO-1390 (Rev. 10-2004)
Reflects USPTO filing fees in effect from 12/ /04

TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER 09086-00218-US
INTERNATIONAL APPLICATION NO. PCT/EP2003/007567	INTERNATIONAL FILING DATE 14 July 2003	U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/521076
TITLE OF INVENTION PREPARATION OF CATALYST SYSTEMS		PRIORITY DATE CLAIMED 15 July 2002
APPLICANT(S) FOR DO/EO/US Roland Kratzer et al.		

Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

1. ☒ This is a **FIRST** submission of items concerning a submission under 35 U.S.C. 371.
2. ☐ This is a **SECOND** or **SUBSEQUENT** submission of items concerning a submission under 35 U.S.C. 371.
3. ☒ This is an express request to begin national examination procedures (35 U.S.C. 371 (f)). The submission must include items (5), (6), (9) and (21) indicated below.
4. ☒ The US has been elected (Article 31).
5. ☒ A copy of the International Application as filed (35 U.S.C. 371 (c)(2))
 - a. ☒ is attached hereto (required only if not communicated by the International Bureau).
 - b. ☐ has been communicated by the International Bureau.
 - c. ☐ is not required, as the application was filed in the United States Receiving Office (RO/US).
6. ☒ An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)).
 - a. ☒ is attached hereto.
 - b. ☐ has been previously submitted under 35 U.S.C. 154(d)(4).
7. ☒ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))
 - a. ☒ are attached hereto (required only if not communicated by the International Bureau).
 - b. ☐ have been communicated by the International Bureau.
 - c. ☐ have not been made; however, the time limit for making such amendments has NOT expired.
 - d. ☐ have not been made and will not be made.
8. ☒ An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).
9. ☐ An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).
10. ☐ An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).

Items 11 to 20 below concern document(s) or information included:

11. ☒ An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
12. ☐ An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
13. ☒ A preliminary amendment.
14. ☒ An Application Data Sheet under 37 CFR 1.76.
15. ☐ A substitute specification.
16. ☐ A power of attorney and/or change of address letter.
17. ☐ A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.
18. ☐ A second copy of the published International Application under 35 U.S.C. 154(d)(4).
19. ☐ A second copy of the English language translation of the International Application under 35 U.S.C. 154(d)(4).
20. ☐ Other items or information:

USE IN LIEU OF PTO-1390 (Rev. 10-2004)
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U.S. APPLICATION NO. (if known, see 37 CFR 1.5) <div style="font-size: 1.5em; font-weight: bold; margin-top: 10px;">10/521076</div>	INTERNATIONAL APPLICATION NO. PCT/EP2003/007567	ATTORNEY'S DOCKET NUMBER 09086-00218-US
21. <input checked="" type="checkbox"/> The following fees are submitted:		CALCULATIONS PTO USE ONLY
BASIC NATIONAL FEE		
Filing Fee		\$ 300.00
Search Fee		\$ 500.00
Examination Fee		\$ 200.00
Application Size Fee, each additional 50 sheets over 100 sheets		\$
TOTAL FILING FEE =		\$ 1,000.00
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)).		\$
CLAIMS	NUMBER FILED	NUMBER EXTRA
Total claims	12-20 =	x
Independent claims	1-3 =	x
MULTIPLE DEPENDENT CLAIM(s) (if applicable)		+
TOTAL OF ABOVE CALCULATIONS =		\$ 1,000.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.		\$
SUBTOTAL =		\$ 1,000.00
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).		\$
TOTAL NATIONAL FEE =		\$ 1,000.00
Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property +		\$
TOTAL FEES ENCLOSED =		\$ 1,000.00
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Amount to be refunded: </div>		\$
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Amount to be charged: </div>		\$
a. <input checked="" type="checkbox"/> A check in the amount of \$ 1,000.00 to cover the above fees is enclosed.		
b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.		
c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 03-2775. A duplicate copy of this sheet is enclosed.		
d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.		
SEND ALL CORRESPONDENCE TO:		
SIGNATURE:		<div style="text-align: center;"> Ashley I. Pezzner </div>
NAME		35,646
CUSTOMER NUMBER: 23416		REGISTRATION NUMBER

Application No. (if known):

Attorney Docket No.: 09086-00218-US

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 473529585 in an envelope addressed to:

MS PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on January 12, 2005
Date


Signature

J. Lynn Ferry

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Letter
Fee Transmittal Sheet
Application Data Sheet
English Translation of
International Application -with-
WO Sheet and Search Report
Amended Sheets (2) (Claims 1-10)
Form PCT/IB/308 (1) Sheet
Form PCT/IPEA/416 & 409 (1/6pp)
Preliminary Amendment
IDS/PTO Form SB-8 w/References
Check for \$1000.00
Return Postcard
370588

USE IN LIEU OF PTO/SB/17 (11-04)
Reflects USPTO filing fees in effect from 12/___/04

FEE TRANSMITTAL For FY 2005 <i>(Reflects USPTO filing fees in effect from 12/___/04)</i>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	Not Yet Assigned 1521076
TOTAL AMOUNT OF PAYMENT (\$) 1,000.00		Filing Date	Concurrently Filed with
		First Named Inventor	Roland Kratzer et al.
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
		Attorney Docket No.	09086-00218-US

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																												
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Deposit Account <input type="checkbox"/> None <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> Deposit Account Number: 03-2775 </div> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> Deposit Account Name: Connolly Bove Lodge & Hutz LLP </div> <p>The Director is hereby authorized to: (check all that apply)</p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments to the above-identified deposit account. <input type="checkbox"/> Other (please identify): _____	2. EXTRA CLAIM FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: right;">Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Each claim over 20</td><td style="text-align: right;">50</td><td style="text-align: right;">25</td></tr> <tr><td>Each independent claim over 3</td><td style="text-align: right;">200</td><td style="text-align: right;">100</td></tr> <tr><td>Multiple dependent claims</td><td style="text-align: right;">360</td><td style="text-align: right;">180</td></tr> <tr><td>For Reissues, each claim over 20 and more than in the original patent</td><td style="text-align: right;">50</td><td style="text-align: right;">25</td></tr> <tr><td>For Reissues, each independent claim more than in the original patent</td><td style="text-align: right;">200</td><td style="text-align: right;">100</td></tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Total Claims</th> <th style="text-align: left;">Extra Claims</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: right;">Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>12</td> <td>- 20 =</td> <td style="text-align: right;">x</td> <td style="text-align: right;">= 0.00</td> </tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Indep. Claims</th> <th style="text-align: left;">Extra Claims</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: right;">Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>- 3 =</td> <td style="text-align: right;">x</td> <td style="text-align: right;">= 0.00</td> </tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;">Multiple Dependent Claims</th> <th style="text-align: right;">Fee (\$)</th> <th style="text-align: right;">Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="text-align: right; margin-top: 10px;">Subtotal (2) \$ 0.00</p>	Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	50	25	Each independent claim over 3	200	100	Multiple dependent claims	360	180	For Reissues, each claim over 20 and more than in the original patent	50	25	For Reissues, each independent claim more than in the original patent	200	100	Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	12	- 20 =	x	= 0.00	Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	1	- 3 =	x	= 0.00	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)																																																																							
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SUBMITTED BY		Registration No.	Telephone
Signature		35,646	(302) 658-9141
Name (Print/Type)	Ashley I. Pezzner		Date
			January 12, 2005

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